

**MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET**
(FOR USE WITH FORM PTO-875)

SERIAL NO. *10/590183*

FILING DATE

28 APR 2007

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1 st AMENDMENT		AFTER 2 nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1	/		/			
2		/		/		
3		/		/		
4		(1)		/		
5		(0)		/		
6		(0)		/		
7		(0)		/		
8		(0)		/		
9	/		/			
10		/		/		
11		/		/		
12		2		/		
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TOTAL IND.	2	↓	2	↓		↓
TOTAL DEP.	11	←	17	←		←
TOTAL CLAIMS	13		19			

	AS FILED		AFTER 1 st AMENDMENT		AFTER 2 nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
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TOTAL IND.		↓		↓		↓
TOTAL DEP.		←		←		←
TOTAL CLAIMS						